## PART B - ¥EE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be aminated to the current correspondence address as indicated unless excreted below or directed otherwise in Block I, by 60 specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7500 04/06/2007 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittat is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Alcon Research, Ltd. Patrick M, Ryan(Q-148) R&D Counsel 6201 So. Freeway (Depositor's name) Jeannie Burke Fort Worth, TX 76134-2099 (Signature) (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 10/824 013 04/14/2004 Najam A. Sharif 5961 TITLE OF INVENTION: METHODS OF TREATING DRY EYE DISORDERS PUBLICATION FEE DUE PREV. PAID ISSUE FEE APPLN, TYPE SMALL ENTITY ISSUE FEE DUE TOTAL FEE(S) DUE DATE DUE NO \$1400 \$300 \$0 \$1700 07/06/2007 nonprovisional EXAMINER ARTUNIT CLASS-SUBCLASS FAY, ZOHREH A 1618 514-252140 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Patrick M. Rvan ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form Number is required.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

Alcon, Inc. Hunenberg, Switzerland

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual & Corporation or other private group entity 🚨 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

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